| RETIRED ON OR AFTER JOET 1, 2012 | | | |
|---|----------------------------------|------------------------------|-------------------------------|
| PLAN COVERAGE DESCRIPTION | 2021 TOTAL MONTHLY PREMIUM | 2021 COUNTY MONTHLY SHARE | 2021 RETIREE MONTHLY SHARE |
| CONTRA COSTA HEALTH PLAN A - BASIC PLAN | | | |
| Retiree on Basic Plan | \$1,056.79 | \$1,035.66 | \$21.13 |
| Retiree & 1 or more dependents on Basic Plan | \$2,517.84 | \$2,467.49 | \$50.35 |
| CONTRA COSTA HEALTH PLAN A - MEDICARE COORDINATION OF BENEFITS (COB) PLAN | | | |
| Retiree on Medicare COB Plan | \$486.04 | \$476.32 | \$9.72 |
| Retiree & 1 dependent on Medicare COB Plan A | \$972.08 | \$952.64 | \$19.44 |
| COMBINATION OF CONTRA COSTA HEALTH PLAN A - BASIC PLAN & MEDICARE COB PLAN | | | |
| Retiree on Medicare COB Plan and 1 or more dependents on Basic Plan | \$1,555.34 | \$1,524.24 | \$31.10 |
| Retiree & 1 dependent on Medicare COB Plan and 1 or more dependents on Basic Plan | \$1,458.13 | \$1,428.97 | \$29.16 |
| Retiree on Basic Plan and 1 dependent on Medicare COB Plan | \$1,555.34 | \$1,524.24 | \$31.10 |
| Retiree on Basic Plan and 2 or more dependents on Medicare COB Plan | \$1,458.13 | \$1,428.97 | \$29.16 |
| Retiree & 1 dependent on Basic Plan and 1 or more dependents on Medicare COB Plan | \$1,555.34 | \$1,524.24 | \$31.10 |
| CONTRA COSTA HEALTH PLAN B - BASIC PLAN | | | |
| Retiree on Basic Plan | \$1,171.46 | \$1,148.04 | \$23.42 |
| Retiree & 1 or more dependents on Basic Plan | \$2,783.58 | \$2,727.91 | \$55.67 |
| CONTRA COSTA HEALTH PLAN B - MEDICARE COORDINATION OF BENEFITS (COB) PLAN | • | • | • |
| Retiree on Medicare COB Plan | \$500.63 | \$490.62 | \$10.01 |
| Retiree & 1 dependent on Medicare COB Plan A | \$1,001.26 | \$981.24 | \$20.02 |
| COMBINATION OF CONTRA COSTA HEALTH PLAN B - BASIC PLAN & MEDICARE COB PLAN | • | | |
| Retiree on Medicare COB Plan and 1 or more dependents on Basic Plan | \$1,602.02 | \$1,569.98 | \$32.04 |
| Retiree & 1 dependent on Medicare COB Plan and 1 or more dependents on Basic Plan | \$1,501.89 | \$1,471.86 | \$30.03 |
| Retiree on Basic Plan and 1 dependent on Medicare COB Plan | \$1,602.02 | \$1,569.98 | \$32.04 |
| Retiree on Basic Plan and 2 or more dependents on Medicare COB Plan | \$1,501.89 | \$1,471.86 | \$30.03 |
| Retiree & 1 dependent on Basic Plan and 1 or more dependents on Medicare COB Plan | \$1,602.02 | \$1,569.98 | \$32.04 |

| PLAN COVERAGE DESCRIPTION | 2021 TOTAL MONTHLY PREMIUM | 2021 COUNTY MONTHLY SHARE | 2021 RETIREE MONTHLY SHARE |
|---|----------------------------------|------------------------------|-------------------------------|
| KAISER PERMANENTE - BASIC PLAN A | | | |
| Retiree on Basic Plan A | \$993.36 | \$794.69 | \$198.67 |
| Retiree & 1 or more dependents on Basic Plan A | \$2,314.54 | \$1,851.64 | \$462.90 |
| KAISER PERMANENTE SENIOR ADVANTAGE (KPSA) PLAN A | | | |
| Retiree on KPSA Plan A | \$372.70 | \$298.16 | \$74.54 |
| Retiree & 1 dependent on KPSA Plan A | \$1,006.62 | \$805.30 | \$201.32 |
| Retiree & 2 dependents on KPSA Plan A | \$1,006.62 | \$805.30 | \$201.32 |
| COMBINATION OF KAISER BASIC PLAN A AND KPSA PLAN A | • | | |
| Retiree on KPSA Plan A, and, 1 or more dependents on Basic Plan A | \$1,693.88 | \$1,355.11 | \$338.77 |
| Retiree & 1 or more dependents on Basic Plan A, and, 1 dependent on KPSA Plan A | \$1,627.28 | \$1,301.83 | \$325.45 |
| KAISER PERMANENTE - BASIC PLAN B | | | |
| Retiree on Basic Plan B | \$809.92 | \$647.94 | \$161.98 |
| Retiree & 1 or more dependents on Basic Plan B | \$1,887.12 | \$1,509.70 | \$377.42 |
| KAISER PERMANENTE SENIOR ADVANTAGE (KPSA) PLAN B | • | • | • |
| Retiree on KPSA Plan B | \$282.55 | \$226.04 | \$56.51 |
| Retiree & 1 dependent on KPSA Plan B | \$763.00 | \$610.40 | \$152.60 |
| Retiree & 2 dependents on KPSA Plan B | \$763.00 | \$610.40 | \$152.60 |
| COMBINATION OF KAISER BASIC PLAN B AND KPSA PLAN B | • | - | |
| Retiree on KPSA Plan B, and, 1 or more dependents on Basic Plan B | \$1,359.75 | \$1,087.80 | \$271.95 |
| Retiree & 1 or more dependents on Basic Plan B, and, 1 dependent on KPSA Plan B | \$1,290.37 | \$1,032.30 | \$258.07 |

| PLAN COVERAGE DESCRIPTION | 2021 TOTAL MONTHLY PREMIUM | 2021 COUNTY MONTHLY SHARE | 2021 RETIREE MONTHLY SHARE |
|---|----------------------------------|------------------------------|-------------------------------|
| HEALTH NET HMO PLAN - BASIC PLAN A | • | | |
| Retiree on Basic Plan A | \$1,861.66 | \$1,489.33 | \$372.33 |
| Retiree & 1 or more dependents on Basic Plan A | \$4,561.07 | \$3,648.86 | \$912.21 |
| HEALTH NET SENIORITY PLUS (HNSP) PLAN A | | | |
| Retiree on HNSP Plan A | \$663.07 | \$530.46 | \$132.61 |
| Retiree & 1 dependent on HNSP Plan A | \$1,326.14 | \$1,060.92 | \$265.22 |
| Retiree & 2 dependents on HNSP Plan A | \$1,989.21 | \$1,591.37 | \$397.84 |
| COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET SENIORITY PLUS PLAN A (HNS | P) | | |
| Retiree on HNSP Plan A, and, 1 dependent on Basic Plan A | \$2,524.73 | \$2,019.79 | \$504.94 |
| Retiree on HNSP Plan A, and, 2 dependents on Basic Plan A | \$3,362.48 | \$2,689.99 | \$672.49 |
| Retiree on HNSP Plan A, and, 3 dependents on Basic Plan A | \$3,362.48 | \$2,689.99 | \$672.49 |
| Retiree & 1 dependent on HNSP Plan A, and, 1 dependent on Basic Plan A | \$3,187.80 | \$2,550.24 | \$637.56 |
| Retiree on Basic Plan A, and, 1 dependent on HNSP Plan A | \$2,524.73 | \$2,019.79 | \$504.94 |
| Retiree & 1 dependent on Basic Plan A, and, 1 dependent on HNSP Plan A | \$3,362.48 | \$2,689.99 | \$672.49 |
| HEALTH NET HMO PLAN - BASIC PLAN B | | | |
| Retiree on Basic Plan B | \$1,294.56 | \$1,035.65 | \$258.91 |
| Retiree & 1 or more dependents on Basic Plan B | \$3,171.67 | \$2,537.34 | \$634.33 |
| HEALTH NET SENIORITY PLUS (HNSP) PLAN B | • | • | • |
| Retiree on HNSP Plan B | \$556.65 | \$445.32 | \$111.33 |
| Retiree & 1 dependent on HNSP Plan B | \$1,113.30 | \$890.64 | \$222.66 |
| Retiree & 2 dependents on HNSP Plan B | \$1,669.95 | \$1,335.96 | \$333.99 |
| COMBINATION OF HEALTH NET BASIC PLAN B AND HEALTH NET SENIORITY PLUS PLAN B (HNSI | P) | | |
| Retiree on HNSP Plan B, and, 1 dependent on Basic Plan B | \$1,851.21 | \$1,480.97 | \$370.24 |
| Retiree on HNSP Plan B, and, 2 dependents on Basic Plan B | \$2,433.76 | \$1,947.01 | \$486.75 |
| Retiree & 1 dependent on HNSP Plan B, and, 1 dependent on Basic Plan B | \$2,407.86 | \$1,926.29 | \$481.57 |
| Retiree on Basic Plan B, and, 1 dependent on HNSP Plan B | \$1,851.21 | \$1,480.97 | \$370.24 |
| Retiree & 1 dependent on Basic Plan B, and, 1 dependent on HNSP Plan B | \$2,433.76 | \$1,947.01 | \$486.75 |

| PLAN COVERAGE DESCRIPTION | 2021 TOTAL MONTHLY PREMIUM | 2021 COUNTY MONTHLY SHARE | 2021 RETIREE MONTHLY SHARE |
|---|----------------------------------|------------------------------|-------------------------------|
| HEALTH NET MEDICARE COORDINATION OF BENEFITS PLAN A (HNCOB) | | | |
| Retiree on HNCOB Plan | \$899.85 | \$719.88 | \$179.97 |
| Retiree & 1 dependent (2 on HNCOB) | \$1,799.70 | \$1,439.76 | \$359.94 |
| Retiree & 2 dependent (3 on HNCOB) | \$2,699.55 | \$2,159.64 | \$539.91 |
| COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET COORDINATION OF BENEFITS PLAN (HNCOB) | | | |
| Retiree on HNCOB, and, 1 dependent on Basic Plan A | \$2,761.51 | \$2,209.21 | \$552.30 |
| Retiree on Basic Plan A, and, 1 dependent on HNCOB | \$2,761.51 | \$2,209.21 | \$552.30 |
| Retiree on HNCOB, and, 2 dependents on HN Basic Plan A | \$3,599.26 | \$2,879.41 | \$719.85 |
| Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan A | \$3,661.36 | \$2,929.09 | \$732.27 |
| Retiree on Basic Plan A, and 2 dependents on HNCOB | \$3,661.36 | \$2,929.09 | \$732.27 |
| COMBINATION OF HEALTH NET SENIORITY PLUS PLAN A (HNSP) AND COORDINATION OF BENEFITS (COB) | | | |
| Retiree on HNSP Plan A, and, 1 dependent on Health Net Coordination of Benefits (COB) Plan | \$1,562.92 | \$1,250.34 | \$312.58 |
| Retiree on Health Net Coordination of Benefits (COB) Plan, and, 1 dependent on HNSP Plan A | \$1,562.92 | \$1,250.34 | \$312.58 |
| HEALTH NET MEDICARE COORDINATION OF BENEFITS PLAN B (HNCOB) | | | |
| Retiree on HNCOB Plan | \$836.62 | \$669.30 | \$167.32 |
| Retiree & 1 dependent (2 on HNCOB) | \$1,673.24 | \$1,338.60 | \$334.64 |
| Retiree & 2 dependent (3 on HNCOB) | \$2,509.86 | \$2,007.89 | \$501.97 |
| COMBINATION OF HEALTH NET BASIC PLAN B AND HEALTH NET COORDINATION OF BENEFITS PLAN (HNCOB) | | | |
| Retiree on HNCOB, and, 1 dependent on Basic Plan B | \$2,131.18 | \$1,704.95 | \$426.23 |
| Retiree on Basic Plan B, and, 1 dependent on HNCOB | \$2,131.18 | \$1,704.95 | \$426.23 |
| Retiree on HNCOB, and, 2 dependents on HN Basic Plan B | \$2,713.73 | \$2,170.99 | \$542.74 |
| Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan B | \$2,967.80 | \$2,374.24 | \$593.56 |
| Retiree on Basic Plan B, and 2 dependents on HNCOB | \$2,967.80 | \$2,374.24 | \$593.56 |
| COMBINATION OF HEALTH NET SENIORITY B PLUS (HNSP) AND COORDINATION OF BENEFITS (COB) PLANS | | | |
| Retiree on HNSP Plan B, and, 1 dependent on Health Net Coordination of Benefits (COB) Plan | \$1,393.27 | \$1,114.62 | \$278.65 |
| Retiree on Health Net Coordination of Benefits (COB) Plan, and, 1 dependent on HNSP Plan B | \$1,393.27 | \$1,114.62 | \$278.65 |

| PLAN COVERAGE DESCRIPTION | | 2021 TOTAL MONTHLY PREMIUM | 2021 COUNTY MONTHLY SHARE | 2021 RETIREE MONTHLY SHARE |
|--|-------------------|----------------------------------|------------------------------|-------------------------------|
| HEALTH NET CA & OOS PPO PLAN - BASIC PLAN A | | | | |
| Retiree on PPO Basic Plan | | \$3,068.33 | \$1,605.27 | \$1,463.06 |
| Retiree & 1 or more dependents on PPO Basic Plan | | \$7,302.63 | \$3,820.18 | \$3,482.45 |
| HEALTH NET CA & OOS PPO PLAN WITH MEDICARE PARTS A & B | | | | |
| Retiree on PPO Medicare Plan | | \$1,231.57 | \$663.91 | \$567.66 |
| Retiree & 1 dependent on PPO Medicare Plan | | \$2,463.14 | \$1,327.80 | \$1,135.34 |
| Retiree & 2 dependent on PPO Medicare Plan | | \$3,694.71 | \$1,943.58 | \$1,751.13 |
| COMBINATION OF HEALTH NET CA & OOS PPO PLAN - BASIC PLAN & PPO MED | ICARE PLAN | • | • | • |
| Retiree on PPO Medicare Plan and 1 dependent on PPO Basic Plan | | \$4,299.90 | \$2,269.18 | \$2,030.72 |
| Retiree on PPO Basic Plan and 1 dependent on PPO Medicare Plan | | \$4,299.90 | \$2,269.18 | \$2,030.72 |
| Retiree & 1 dependent on PPO Medicare Plan and 1 dependent on PPO Basic Pl | an | \$5,531.47 | \$2,933.07 | \$2,598.40 |
| Retiree on PPO Basic Plan and 2 dependents on PPO Medicare Plan | | \$5,531.47 | \$2,933.07 | \$2,598.40 |
| DELTA DENTAL PREMIER PPO - \$1,800 ANNUAL BENEFIT | Ta | 1 410-0 | 1 40-11 | 1 4.00 |
| For CCHP Plans | Retiree | \$46.52 | \$45.14 | \$1.38 |
| | Family | \$105.08 | \$101.96 | \$3.12 |
| For Health Net Plans | Retiree | \$46.52 | \$35.93 | \$10.59 |
| | Family | \$105.08 | \$81.16 | \$23.92 |
| For Kaiser Permanente Plans Without a Health Plan | Retiree Family | \$46.52 \$105.08 | \$35.93 \$81.16 | \$10.59 \$23.92 |
| | Retiree | \$105.08 | \$46.51 | \$23.92 |
| | Family | \$105.08 | \$105.07 | \$0.01 |
| | i anniy | \$105.00 | \$105.07 | Ş0.01 |
| DELTA CARE (HMO) | | | | |
| | Retiree | \$25.35 | \$24.85 | \$0.50 |
| For CCHP Plans | Family | \$54.78 | \$53.69 | \$1.09 |
| For Health Net Plans | Retiree | \$25.35 | \$19.78 | \$5.57 |
| For Health Net Plans | Family | \$54.78 | \$42.73 | \$12.05 |
| For Kaiser Permanente Plans | Retiree | \$25.35 | \$19.78 | \$5.57 |
| i of Raiser Fermanetice Flatis | Family | \$54.78 | \$42.73 | \$12.05 |
| Without a Health Plan | Retiree | \$25.35 | \$25.34 | \$0.01 |
| | Family | \$54.78 | \$54.77 | \$0.01 |